

Growth Management Customer Service Center
20 Bridge Street
Bluffton, SC 29910
(843) 706-4500
www.townofbluffton.sc.gov
applicationfeedback@townofbluffton.com

Applicant	Property Owner	
Name:	Name:	
Phone:	Phone:	
Mailing Address:	Mailing Address:	
E-mail:	E-mail:	
Town Business License # (if applicable):		
Project Information		
Project Name:	Acreage:	
Project Location:	Comprehensive Plan Amendment ÿYes No	
Existing Zoning:	Proposed Zoning:	
Parcel Number(s):		
Project Description:		
Minimum Requirements for Submittal		
 1. Digital files of the maps and/or plans depicting the subject property. 2. Project Narrative describing reason for application and compliance with the criteria in Article 3 of the UDO. 3. An Application Review Fee as determined by the Town of Bluffton Master Fee Schedule. Checks made payable to the Town of Bluffton. 4. Recorded deed and plat showing proof of property ownership. 		
Disclaimer: The Town of Bluffton assumes no legal or financial liability to the applicant or any third party whatsoever by approving the plans associated with this application .		
I hereby acknowledge by my signature below that the foregoing application is complete and accurate and that I am the owner of the subject property. As applicable, I authorize the subject property to be posted and inspected.		
Property Owner Signature:	Date:	
Applicant Signature:	Date:	
For Office Use		
Application Number:	Date Received:	
Received By:	Date Approved:	



TOWN OF BLUFFTON ZONING MAP AMENDMENT APPLICATION PROCESS NARRATIVE

The following Process Narrative is intended to provide Applicants with an understanding of the respective application process, procedures and Unified Development Ordinance (UDO) requirements for obtaining application approval in the Town of Bluffton. While intended to explain the process, it is not intended to repeal, eliminate or otherwise limit any requirements, regulations or provisions of the Town of Bluffton's Unified Development Ordinance. Compliance with these procedures will minimize delays and assure expeditious application review.

Step 1. Pre-Application Meeting	Applicant & Staff
Prior to the filing of a Zoning Map Amendment Application, the Applicant designee at a Pre-Application Meeting for comments and advice on the a specifications, and applicable standards required by the UDO.	
Step 2. Application Check-In Meeting	Applicant & Staff
Upon receiving input from Staff at the Pre-Application Meeting, the Appli required submittal materials during a mandatory Application Check-In Methe submission for completeness.	
Step 3. Review by UDO Administrator	Staff
If the UDO Administrator determines that the Zoning Map Amendment Applanning Commission (PC) Meeting agenda.	oplication is complete, it shall be placed on the next available
Step 4. Planning Commission Workshop	Applicant, Staff & Planning Commission
The PC shall hold a Public Workshop to provide the public with information	on and a forum to review the preliminary application.
Step 5. Planning Commission Meeting & Public Hearing	Applicant, Staff & Planning Commission
The PC shall hold a Public Hearing and review the Zoning Map Amendme in the UDO. The PC may recommend that Town Council approve, approv	
Step 6. Town Council Meeting- 1st Reading	Applicant, Staff & Town Council
Town Council shall review the Zoning Map Amendment Application for co Council may approve, approve with conditions, table, or deny the applica	
Step 7. Town Council Meeting- 2 nd and Final Reading & Public Hearing	Applicant, Staff & Town Council
Town Council shall hold a Public Hearing and review the Zoning Map Amprovisions in the UDO. Town Council may approve, approve with condition	
Step 8. Zoning Map Amendment Approval	Staff
If Town Council approves the Zoning Map Amendment Application, the UApplicant.	IDO Administrator shall issue an approval letter to the

Town of Bluffton Zoning Map Amendment Application